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MESSAGE

U.S. Serial No. 10/528,279

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Wednesday, March 29, 2006

TIME:

3:11:00 PM

CLIENT/MATTER NO.:

67562.000021

## MAR 2 9 2006

PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

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			Application Number	10/528,27		uilleaa it	HISDIAVS A VAIN C	AID CONTAIN BORRDER.
TE	RANSMITTAL	÷	Filing Date	August 18	3, 2005			
	FORM	•	First Named Inventor	BABÉJ, J				
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(to be used fo	r all correspondence after in	tial filino)	Examiner Name					: : :
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Printed name	Eugene C. Azucidlo		U					
Date	3/29/06			Reg. No.	31,900	)		
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This collection of Information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Attomey Docket Number

## MAR 2 9 2006

PTO/SB/82 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

67562.21

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/528,279 **REVOCATION OF POWER OF** Filing Date August 18, 2005 **ATTORNEY WITH** First Named Inventor BABEJ, J. **NEW POWER OF ATTORNEY** Art Unit 2833 AND. **Examiner Name CHANGE OF CORRESPONDENCE ADDRESS** 

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith.						
<i>OR</i> ☑ I hereby appoint	the practitioners associated with the Custo	mer Number:	58785			
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  58785						
OR						
Firm or Individual Name	[					
Address						
City	State		Zip			
Country						
Telephone		Email				
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature /	<i>f</i>					
Name Jiri BABBA		·				
Date 766.6	2006	lephone				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
*Total of torms are submitted.						

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PTO/SB/82 (01-06) Approved for use through 12/31/2008, OMB 0651-0035

	Application Number	lless it displays a valid OMB control number 10/528,279		
REVOCATION OF POWER OF	Filing Date	August 18, 2005		
ATTORNEY WITH	First Named Inventor	BABEJ, J.		
NEW POWER OF ATTORNEY	Art Unit	2833		
AND	Examiner Name			
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	67562.21		

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith.						
OR ☑ I hereby app	oint the practitioners as	sociated with the Custo	omer Number:		58785	
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  58785						
OR						
Firm or Individual Na	me					
Address						
City		State	T		Zip	
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I am the:  Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
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Name Richard	The first for th					
Date 70		<b>⊋</b>	elephone	<del></del>		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
"Total of forms are submitted.						

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ATTORNEY WITH	First Named Inventor	BABEJ, J.	
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AND	Examiner Name		
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	67562.21	

I hereby revoke all previous powers of attorney given in the above-identified application.						
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I am the:						
Applicant/Inventor.						
- Application of the second of						
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37, CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
Signature Signature						
Signature /////						
Name Michael Vieth						
Date Feb.	13, 2006	Те	lephone	004364	175	759141
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of forms are submitted						

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